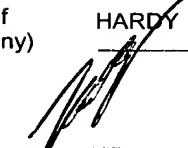
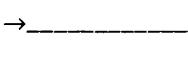




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**PAGE 2 OF U.S.A. DECLARATION FORM**  
**(Discard this page in a sole inventor application)**

3 Typewritten Full Name of Second Joint Inventor (if any)	HARDY	Christian
	Given Name	Middle Initial
		Family Name
*4 Inventor's Signature		
5 Date of Signature	05-16-2001	
6 Residence	LE THORONET FRANCE	
7 Citizenship	City	State or Province
	French	Country
8 Post Office Address (Insert complete mailing address, includ. country)	Quartier Peyrine 83340 LE THORONET FRANCE	
3 Typewritten Full Name of Third Joint Inventor (if any)	STAWIKOWSKI	Jean-Marie
	Given Name	Middle Initial
		Family Name
*4 Inventor's Signature		
5 Date of Signature	05-09-2001	
6 Residence	ANTIBES FRANCE	
7 Citizenship	City	State or Province
	French	Country
8 Post Office Address (Insert complete mailing address, includ. country)	350, chemin de la Parouquine 06600 ANTIBES FRANCE	
3 Typewritten Full Name of Fourth Joint Inventor (if any)	ROUSSEAU	Robert
	Given Name	Middle Initial
		Family Name
*4 Inventor's Signature		
5 Date of Signature	May 16 <sup>th</sup> . 2001	
6 Residence	ANTIBES FRANCE	
7 Citizenship	City	State or Province
	French	Country
8 Post Office Address (Insert complete mailing address, includ. country)	N° 833E, Chemin des Combes Eden Park "E" 06600 ANTIBES FRANCE	
3 Typewritten Full Name of Fifth Joint Inventor (if any)	Given Name	Middle Initial
		Family Name
*4 Inventor's Signature		
5 Date of Signature		
6 Residence		
7 Citizenship	City	State or Province
		Country
8 Post Office Address (Insert complete mailing address, includ. country)		

\* Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

\*\* This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.